PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION DOC	COMPLETE THIS SECTION ON DELIVERY PAGE 2 of 3
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X Agent Addressee B. Beceived by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1?
Wendy Robinson Coosa County Jail PO Box 279	(in the state of t
Rockford, AL 35136	3. Service Jey
CaO 05-416	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
2. Article Number	4. Restricted Delivery? (Extra Fee) ☐ Yes
(Transfer for the control of the con	130 0005 9732 0620

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102595-02-M-1540

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY Page 3 C
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X Addressee B. beceived by (Printed Name) D. Is delivery address different no Mission 1?
1. Article Addressed to: Coosa County Jail PO Box 279 Rockford, AL 35136	If YES, enter relivery address below:
C40 05-416	3. Service Type Certified Mail Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Service Type Reprise Mail Reprise Mail Reprise Mail Reprise Mail Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7002 2	030 0005 9732 0606

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